

The real product is image, not cigarettes

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era of supposedly great scientific advances and laugh," says Dr. Blum. "Imagine advertising a lethal product that negated much of the progress the medical profession has accomplished for the world!"

Although he began speaking out publicly against tobacco as early as high school, it wasn't until his residency year in family medicine at the University of Miami in 1976 (he spent the previous year as an intern in Montreal at the Royal Victoria Hospital, where he discovered a weakness for maple-glazed doughnuts) that Dr. Blum's unlikely childhood hobby became a professional calling.

Asked to give a series of slide shows and lectures on the health risks of smoking, he decided instead to focus on the evolution of tobacco industry advertising.

"Everyone knew the dangers of smoking," he said. "My point was that the tobacco industry's real product was image, not cigarettes."

By rummaging through attics, flea markets and old magazines, he found a multitude of cigarette ads supporting his contention. Encouraged by the favourable reaction his presentations received—and concerned by the medical profession's apathy toward smoking—Dr. Blum and two equally militant colleagues founded DOC in 1977.

Armed with little more than attitude, they organized street demonstrations and crashed tobacco industry functions and tobacco-sponsored events. In particular, they relentlessly lampooned the annual Virginia Slims tennis tournament and disrupted matches by waving signs with messages like, "You've coughed up long enough, baby!"

These actions, which DOC members dubbed "house calls,"

led to several televised ejections and even arrests. As DOC's notoriety and membership grew—to day, the organization has some 5,000 members with at least one chapter in every U.S. state—so too did Dr. Blum's stature within anti-smoking circles.

As editor of the *New York State Journal of Medicine* from 1983 to '86, he researched and wrote dozens of often explosive articles and reports on two main themes: the tobacco industry's youth-oriented marketing activities, and the silence of organized American medicine on the issue of tobacco.

His razor-sharp, headline-grabbing wit and blunt confrontational manner also made him a hot commodity as a speaker on the anti-smoking conference circuit. By 1987, when he joined the department of family medicine at Houston's Baylor University, where he is now an associate professor, Dr. Blum was giving more than 200 talks a year in the U.S., Canada and beyond.

His mostly volunteer efforts have earned him numerous awards, including the American Medical Association's first award for "Distinguished Service on Behalf of America's Youth" in 1990.

Since the mid-1990s, however, when the war on tobacco finally emerged as a mainstream public policy issue in the U.S., Dr. Blum has become, ironically, one of the most acerbic critics of the anti-smoking movement.

"It's exciting that the issue I've devoted my career to is in the papers everyday and on everybody's



One of the cigarette ads from Dr. Alan Blum's collection.

lips," he said. "But bashing the tobacco industry has become the essence of political correctness. The issue has lost all sense of reality."

On a strategic level, Dr. Blum is opposed to the omnibus approach to tobacco controls that were at the heart of both the killed bill last June and the proposed \$206-billion settlement in November between several state governments and the largest U.S. tobacco companies.

(While the fate of the latter deal is still uncertain, it was welcome news for tobacco investors. The day after details of the settlement were announced, tobacco

stocks soared, making the industry's shares the best-performing of the Standard & Poor 500 index in the third quarter of 1998.)

"The problem is that many of the very powerful people who now lead the anti-smoking movement have only recently woken up to this issue, and they have very simplistic notions as to what makes people smoke," said Dr. Blum.

"Unfortunately, when people want to do something good they instinctively want to pass laws. But more regulation is not the answer to this issue."

Dr. Blum also condemns what he sees as the lynch-mob mental-

ity driving the anti-smoking movements on both sides of the U.S.-Canada border.

"Punishing a legal industry by imposing huge fines or curbing its freedom of speech may let people think they've done something good. But it becomes a moral crusade instead of a realistic effort to fight smoking, and it doesn't stop one of the 3,000 kids who start smoking every day in America from lighting up."

While his comments have mystified friends and made him a pariah in many anti-smoking quarters, Dr. Blum stands firm in his belief that education, understanding and satire are the only plausible weapons in the war against tobacco.

"The tobacco industry certainly deserves what it's getting for all the things they've done," said Dr. Blum. "But what is really frightening to me is all those people who were in bed with the industry all those years who have now turned on it."

"They seem to think the louder they yell about the 'evil merchants of death,' the more people will never suspect they were the allies of the industry."

"I say, a pox on both their houses."

One of the groups to receive Dr. Blum's scorn is the American Medical Association (AMA). In a July 1995 article he wrote for the *Lancet*, he noted that the AMA collected millions of dollars in research money from the tobacco industry after 1964—the year the U.S. Surgeon General's report definitively linked smoking and lung cancer for the first time.

The article cited memos from the 1970s in which AMA officials stated their eagerness "to avoid any incident that will create displeasure with the AMA among tobacco area Congressmen."

"The AMA is shameless in its continued wilful denial about its past," Dr. Blum told the *Medical Post*.

"For me, until they pass a resolution acknowledging their decades-long involvement in furthering tobacco industry interests, they have absolutely no credibility in this issue."

'Public pressure is needed'

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restrict access and use of tobacco on board Canadian warships.

Since 1994, when he succeeded Dr. Edward Pipe, now chairman of the Canadian Centre for Ethics in Sports, to become only the second president in the PSFC's 14-year history, Dr. Taylor has taken his antismoking zeal and convictions to a much wider audience. As president of the 1,500-member association, a registered charity that acts as the eyes and ears of the Canadian medical profession on tobacco issues, Dr. Taylor directs efforts designed to educate public policy-makers and bureaucrats on the health and social impacts of smoking.

In particular, the group conducts and provides research in support of antitobacco legislation. In 1994, for example, the PSFC was a key adviser to the Ontario government in the drafting of the Ontario Tobacco Act, a law that banned tobacco sales in pharmacies.

More recently, the group helped the B.C. government prepare the groundbreaking multi-billion-dollar lawsuit it launched against the tobacco industry last November to recover smoking-related health costs.

That action, the first of its kind by a Canadian province, came on the heels of another precedent-setting, PSFC-aided initiative by the B.C. government: new legislation that requires tobacco companies to disclose all ingredients in cigarettes and the toxins that come out in the smoke.

Interestingly, Dr. Taylor was ecstatic when he learned the tobacco industry had decided to immediately challenge the new rules in court, setting the stage for a court battle that is expected to drag on for years.

"The best measure of success for any antitobacco initiative is the tobacco industry's reaction to it. If they simply ignore something, you can be sure it's because they don't consider it a threat. Judging by their reaction to B.C.'s new law, it sure looks like a good move," said Dr. Taylor, who met recently with Manitoba Health Minister Darren Praznik to discuss the possibility of similar measures in that province.

Dr. Taylor also expressed satisfaction with federal Health Minister Allan Rock's recent proposal to bring in new legislation requir-

ing health warnings to cover 60% of cigarette packaging. Cigarette manufacturers would also have to list six toxic ingredients on packages instead of only three, as is now required.

"The main value of the minister's proposals is they will make packages as ugly as possible. ... Cigarette companies have long understood that attractive packaging works best on teenagers. So, as long as the industry is allowed to make packages look sexy, as long as it is allowed to continue to associate glamorous images with its products, we'll have a very difficult time moving forward."

While encouraged by Rock's proposals and Health Canada's stiffening resolve to take a more public stand against tobacco use, Dr. Taylor is convinced that, without public pressure, neither action would have occurred.

"No single action is going to eliminate the smoking problem," said Dr. Taylor. "A whole combination of initiatives is needed that must be taken simultaneously. The first and most important is political will and commitment to doing something. Unfortunately, we haven't seen much of that so far."

Dr. Taylor believes the average Canadian physician can play an important role in the antismoking movement by boycotting and/or speaking out against medical or medically related organizations supported by tobacco money. The example he finds most galling is the association between the Canadian Medical Hall of Fame—which celebrates Canadian innovations in medical science—and Canada Trust, an affiliate of Imasco. Imasco is owner of Imperial Tobacco in Canada and is itself 40% owned by U.K. tobacco giant B.A.T. Industries.

"The hall's board of directors looks like a Who's Who of Canadian medicine. What we have then, in essence, is the crème de la crème of Canadian medicine involved with an organization that is closely affiliated with the tobacco industry," said Dr. Taylor, who added that Imasco also owns Shoppers Drug Mart, a major sponsor of the Canadian Breast Cancer Foundation.

"It's a mystery to me how physicians could allow this type of thing to go on. ... I find it appalling that prominent Canadians openly associate themselves with these people."

"It just goes to show you what money can do."

Mark Cardwell is the Medical Post's Quebec City correspondent.



The 'tomb of the unknown smoker' was placed on Parliament hill in September 1996 to mark the 100,000th death from tobacco-caused disease since the Liberal government had assumed office.